

Substitute for form 1449/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Application Number	09/553,969
				Filing Date	April 21, 2000
				First Named Inventor	WALLACE, DONALD G.
				Art Unit	1611
				Examiner Name	CHANNAVAJJALA, Lakshmi Sarada
Sheet	1	of	1	Attorney Docket Number	017067-002040US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	B5	WO	94/27630	A1	12-08-1994	Kaken Pharmaceutical Co. Ltd.	English abstract	<input type="checkbox"/>
	B6	EP	0132983	A	02-13-1985	Hitachi Chemical Co. Ltd. (equivalent to JP 60-222045)	English abstract	<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T ²
	C4	Japanese Office Action mailed April 13, 2009 in JP 10-511970, 15 pages.			<input type="checkbox"/>

Examiner Signature		Date Considered	
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* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.